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CONFIRMATION NO. 5867

SERIAL NUMBER 10/713,790	FILING OR 371(c) DATE 11/12/2003 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. B0801.70255US01	
APPLICANTS Gerald B. Pier, Brookline, MA; Tomas Maira-Litran, Brookline, MA;					
** CONTINUING DATA ***** This appln claims benefit of 60/425,425 11/12/2002					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/19/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>Allowance</u> Acknowledged <u>Examiner's Signature</u> Initials		STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 2
ADDRESS 23628					
TITLE Polysaccharide vaccine for staphylococcal infections					
FILING FEE RECEIVED 603	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		